

# AUTO CR - LOG SUMMARY #1071188

TYPE: INFO

## Incident Finding / Overall Case Finding

Description of Incident	Finding	Entered By	Entered Date
It is reported that officers were on patrol and observed several individuals loitering in the above area. The subject refused to leave the scene after the officers repeatedly told him to do so. When the officers exited the vehicle and again told the subject to leave, the subject got into a fighting stance and yelled, "Bust a move!" The officers attempted to place the subject in custody, but he pushed Officer Watson and walked away from them. The subject also stiffened his arms to defeat arrest. Officer Edwards deployed his Taser and used a contact stun in an attempt to gain control of the subject, which had no apparent effect. Additional officers arrived and assisted to take the subject into custody.	(None Entered)		

## Reporting Party Information

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Reporting Party Third Party	RODRIGUEZ, DAVID M	1015		SERGEANT OF POLICE	M	S		

## Incident Information

Incident From Date/Time	Address of Incident	Beat	Dist. Of Occurrence	Location Code	Location Description
25-AUG-2014 10:13 - 25-AUG-2014 10:13		1123	011	303 - SIDEWALK	

## Accused Members

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Status	Initial / Intake Allegation
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## Other Involved Parties

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
NON-CPD	Victim/Subject					M	BLK		
CPD Employee	Witness	WATSON, GRAYLIN L	8250		POLICE OFFICER	M	BLK		
CPD Employee	Witness	NEBERIEZA, ANDREW M	20168		POLICE OFFICER	M	WHI		
CPD Employee	Involved Member	EDWARDS, DARRYL	19970		POLICE OFFICER	M	BLK		

## Involved Party Associations

Role	Rep. Party Name	Related Person	Relationship
Reporting Party Third Party	RODRIGUEZ, DAVID M	EDWARDS, DARRYL	CO-WORKER
Reporting Party Third Party	RODRIGUEZ, DAVID M	NEBERIEZA, ANDREW M	CO-WORKER
Reporting Party Third Party	RODRIGUEZ, DAVID M	WATSON, GRAYLIN L	CO-WORKER
Reporting Party Third Party	RODRIGUEZ, DAVID M		NO RELATIONSHIP

## Incident Details

CR Required?		Manner Incident Received?	PAX
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N	Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IPRA	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Civil Suit Settled Date:	
Notify Chief Administrator?	N	Notify Chief?	
Notify Coordinator?		Notification Does Not Apply?	Y
Notification Other?	N		
Notification Comments:			

## Incident Category List

Incident Category	Primary?	Initial?
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE	Y	Y
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE		N

## Investigator History

Investigator	Type	Assigned Team	Assigned Date	Scheduled End Date	Investigation End Date	No. of Days
KOBEL, DANIEL	Primary	RAPID RESPONSE	30-SEP-2014	29-DEC-2014	23-DEC-2014	84
ROBERTS, GEORGE	Supervisor	RAPID RESPONSE	30-SEP-2014	29-DEC-2014	23-DEC-2014	

## Extension History

Name	Previous Scheduled End Date	Extended Scheduled End Date	Date Certified Letter Sent	Reason Selected	Explanation	Extension Report Date	Approved By	Approved Date	Approval Comments
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## Current Allegations

Accused Name	Seq. No.	Allegation	Category	Subcategory	Finding
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## Situations (Allegation Details)

Accused Name	Alleg. No.	Situation	Victim/Offender Armed?	Weapon Types	Weapon Other	Weapon Recovered?	Deceased?
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## Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
RE-CLOSED AT C.O.P.A.	29-JUL-2015 04:35	STOUTENBOROUGH, ANDREA	SUPERVISING INV COPA	113 /	"Re-Closed at IPRA" date was not properly entered previously on 22 Jan 2015 as required by CLEAR.
ADMINISTRATIVELY CLOSED	22-JAN-2015 03:06	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
RE-OPENED AT C.O.P.A.	22-JAN-2015 03:06	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
CLOSED AT C.O.P.A.	22-JAN-2015 03:06	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	Re-closed in error
PENDING C.O.P.A. COORDINATOR REVIEW	24-DEC-2014 02:55	ROBERTS, GEORGE	SUPERVISING INVESTIGATOR	113 /	
PENDING INVESTIGATIVE REVIEW	23-DEC-2014 02:29	KOBEL, DANIEL	INVESTIGATOR I COPA	113 /	
PENDING INVESTIGATION	30-SEP-2014 01:18	ROBERTS, GEORGE	SUPERVISING INVESTIGATOR	113 /	
PENDING ASSIGN INVESTIGATOR	30-SEP-2014 11:16	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
PENDING ASSIGN TEAM	27-AUG-2014 01:31	ROBERTS, GEORGE	SUPERVISING INVESTIGATOR	113 /	
PENDING SUPERVISOR REVIEW	27-AUG-2014 01:00	HAYES, SHANNON	INVESTIGATOR 2 COPA	113 /	
PRELIMINARY	26-AUG-2014 07:55	HAYES, SHANNON	INVESTIGATOR 2 COPA	113 /	Needs Taser download and final arrest report.
PRELIMINARY	26-AUG-2014 12:08	GONZALEZ, JORGE	POLICE OFFICER	116 /	INITIATED BY SGT RODRIGUEZ Emp No. [REDACTED]

## Attachments

No.	Type	Related Person	No. of Pages	Narrative	Original in File	Entered By	Entered Date/Time	Status	Approve Content	Approve Inclusion
1	FACE SHEET					GONZALEZ, JORGE	26-AUG-2014 12:08			
1	INVESTIGATION					KOBEL, DANIEL	30-SEP-2014 01:37			
2	CONFLICT CERTIFICATION					ROBERTS, GEORGE	30-SEP-2014 01:18			
3	CONFLICT CERTIFICATION					KOBEL, DANIEL	30-SEP-2014 01:37			
	DOCUMENTS - INTAKE INCIDENT		2	PO Graylin Watson	N	HAYES, SHANNON	26-AUG-2014 07:54	APPROVED		

## Attachments

No.	Type	Related Person	No. of Pages	Narrative	Original in File	Entered By	Entered Date/Time	Status	Approve Content	Approve Inclusion
	DOCUMENTS - INTAKE INCIDENT		1		N	HAYES, SHANNON	27-AUG-2014 01:00	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		2	PO Darryl Edwards	N	HAYES, SHANNON	26-AUG-2014 07:53	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		2	PO Andrew Neberieza	N	HAYES, SHANNON	26-AUG-2014 07:53	APPROVED		
	RELATED - TACTICAL RESPONSE REPORT					KOBEL, DANIEL	24-OCT-2014 02:51			
	RELATED - TACTICAL RESPONSE REPORT					KOBEL, DANIEL	24-OCT-2014 02:51			
	DOCUMENTS - INTAKE INCIDENT		2	Battery - Simple; Assault - Simple; Interference With Public Officer - Resist/Obstruct/Disarm Officer	N	HAYES, SHANNON	26-AUG-2014 07:52	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		2	PO Graylin Watson	N	HAYES, SHANNON	26-AUG-2014 07:54	APPROVED		
	RELATED - TACTICAL RESPONSE REPORT					KOBEL, DANIEL	24-OCT-2014 02:50			
	DOCUMENTS - INVESTIGATION		1		Y	KOBEL, DANIEL	23-DEC-2014 02:29	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		5		N	HAYES, SHANNON	27-AUG-2014 07:16	APPROVED		

## Review Incident

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
INVESTIGATIVE SUPERVISOR REVIEW		SUBMITTED	ROBERTS, GEORGE	SUPERVISING INVESTIGATOR	113	24-DEC-2014 02:55	Enhanced Taser Program. Unable to contact victim due to no contact address or telephone number. See attempt to contact attachment.

## Review Accused

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
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## Accused Finding History

Accused	Allegation	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Finding	Finding Comments
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## Accused Penalty History

Accused	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Penalty	Penalty Comments
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## Findings

Accused Name	Allegations	Category	Concur?	Findings	Comments
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# FACE SHEET (Notification Date: 26-AUG-2014) - LOG #1071188

TYPE: INFO

## Reporting Party Information

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Reporting Party Third Party	RODRIGUEZ, DAVID M	1015		011 /	SERGEANT OF POLICE	M	S		

## Incident Information

Incident From Date/Time	Address of Incident	Beat	Dist. Of Occurrence	Location Code	Location Description
25-AUG-2014 10:13 - 25-AUG-2014 10:13		1123	011	303 - SIDEWALK	

## Accused Members

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Status	Initial / Intake Allegation
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## Incident Details

CR Required?		Manner Incident Received?	PAX
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N		
Motor Vehicle (V)?		Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IPRA	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Notify Chief?	
Notify Chief Administrator?	N	Notification Does Not Apply?	Y
Notify Coordinator?			
Notification Other?	N		

## Initial Incident Category List

Initial Incident Category	Primary?
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE	Y
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE	

## Assignment History

Assigned To	Assigned Team	Investigator	Assignment Date/Time	Assigned By	Reason
IPRA	RAPID RESPONSE	KOBEL, DANIEL (PRIMARY INV)	30-SEP-2014 13:18	ROBERTS, GEORGE	
IPRA	RAPID RESPONSE	ROBERTS, GEORGE (SUPERVISOR)	30-SEP-2014 11:16	WEEDEN, WILLIAM	
IPRA	RAPID RESPONSE	-	30-SEP-2014 11:16	WEEDEN, WILLIAM	
IPRA	CIVILIAN OFFICE OF POLICE ACCOUNTABILITY	-	26-AUG-2014 00:08	GONZALEZ, JORGE	

## Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
RE-CLOSED AT C.O.P.A.	29-JUL-2015 04:35	STOUTENBOROUGH, ANDREA	SUPERVISING INV COPA	113 /	"Re-Closed at IPRA" date was not properly entered previously on 22 Jan 2015 as required by CLEAR.
ADMINISTRATIVELY CLOSED	22-JAN-2015 03:06	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
RE-OPENED AT C.O.P.A.	22-JAN-2015 03:06	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
CLOSED AT C.O.P.A.	22-JAN-2015 03:06	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	Re-closed in error
PENDING C.O.P.A. COORDINATOR REVIEW	24-DEC-2014 02:55	ROBERTS, GEORGE	SUPERVISING INVESTIGATOR	113 /	

## Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
PENDING INVESTIGATIVE REVIEW	23-DEC-2014 02:29	KOBEL, DANIEL	INVESTIGATOR I COPA	113 /	
PENDING INVESTIGATION	30-SEP-2014 01:18	ROBERTS, GEORGE	SUPERVISING INVESTIGATOR	113 /	
PENDING ASSIGN INVESTIGATOR	30-SEP-2014 11:16	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
PENDING ASSIGN TEAM	27-AUG-2014 01:31	ROBERTS, GEORGE	SUPERVISING INVESTIGATOR	113 /	
PENDING SUPERVISOR REVIEW	27-AUG-2014 01:00	HAYES, SHANNON	INVESTIGATOR 2 COPA	113 /	
PRELIMINARY	26-AUG-2014 07:55	HAYES, SHANNON	INVESTIGATOR 2 COPA	113 /	Needs Taser download and final arrest report.
PRELIMINARY	26-AUG-2014 12:08	GONZALEZ, JORGE	POLICE OFFICER	116 /	INITIATED BY SGT RODRIGUEZ Emp No. [REDACTED]



CHICAGO POLICE DEPARTMENT  
**ORIGINAL CASE INCIDENT REPORT**

3510 S. Michigan Avenue, Chicago, Illinois 60653  
(For use by Chicago Police Department Personnel Only)  
CPD-11.388(6/03)-C

RD #: [REDACTED]  
Case ID: [REDACTED]  
EVENT #:

INCIDENT	<b>APPROVAL COMPLETE</b>		
	IUCR: 0460 - Battery - Simple		
	0560 - Assault - Simple		
	3710 - Interference With Public Officer - Resist/Obstruct/Disarm Officer		
	Occurrence Location: [REDACTED] 303 - Sidewalk	Beat: 1123	Unit Assigned: 1161B RO Arrival Date: 25 August 2014 22:00
	Occurrence Date: 25 August 2014 22:00		# Offenders: 1

NON-OFFENDER(S)	<b>VICTIM - Government</b>		
	Name: STATE OF ILLINOIS		Contact Person: P.O. WATSON #8250
	3151 W Harrison St Chicago, Illinois 312 - 746 - 8386		Beat: 1134
	CPD Officer: No		
	<b>Other Communications and Availability</b>		
	Business Phone : 312-746-8386		
	Available Time 09:00:00 - 03:00:00		

SUSPECT(S)	<b>Suspect # 1</b>		<b>In Custody</b>	
	Name: [REDACTED]		<b>Demographics</b>	
	Res: [REDACTED] None		Male Black 5'11, 210 lbs , Brown Eyes Brown Hair Dreadlocks Hair Style Medium Brown Complexion	
	Beat: 1522		DOB: [REDACTED] Age: 33 years Birth Place: Illinois Suspected of Using: Alcohol	

GANG INFO	<b>Incident Related Info</b>	
	[REDACTED] (Suspect)	
	Affiliation: MEMBER	Gang Identifications: Other
	Gang Name: [REDACTED]	

**NARRATIVES**

ADDRESS OF ARREST: [REDACTED] IN SUMMARY R/OS WHILE ON ROUTINE PATROL OBSERVED SEVERAL MALES/FEMALES DRINKING/LOITERING AT ABOVE ADDRESS WHICH IS A KNOWN NARCOTICS AREA. R/O GAVE ABOVE CITIZENS AN ORDER TO DISPERSE. ABOVE OFFENDER REFUSED TO LEAVE THE SCENE AFTER HE WAS GIVEN 2 ORDERS TO DISPERSE. R/OS EXITED THE VEHICLE AND APPROACHED ABOVE OFFENDER. AT THIS TIME ABOVE OFFENDER WAS TOLD TWICE MORE TO DISPERSE. ABOVE GOT OFF OF HIS BIKE AFTER THE LAST ORDER TO DISPERSE, GOT INTO A FIGHTING STANCE AND YELLED "BUST A MOVE!" R/OS BEING IN FEAR OF RECEIVING A BATTERY ATTEMPTED TO PLACE ABOVE OFFENDER IN CUSTODY . WHILE TRYING TO PLACE ABOVE OFFENDER IN HANDCUFFS HE BEGAN TO ACTIVELY RESIST BY PUSHING P.O. WATSON #8250, CONTINUING TO WALK AWAY FROM R/OS, AND THEN STIFFENING HIS ARMS TRYING TO DEFEAT THE ARREST. P.O. EDWARDS #19970 DEPLOYED TASER AFTER YELLING "TASER!, TASER!" STRIKING ABOVE OFFENDER. ABOVE OFFENDER WAS ALSO DRY STUNNED BY P.O. EDWARDS. THE TASER AND DRY STUNNING HAD NO APPARENT EFFECT. EVENTUALLY OTHER POLICE OFFICERS ARRIVED ON SCENE TO HELP PLACE ABOVE OFFENDER IN CUSTODY. ABOVE WAS TAKEN DOWN TO THE GROUND

RD #:

## NARRATIVES

AND CONTINUED TO KICK HIS LEGS AND STIFFEN HIS ARMS. THE ABOVE OFFENDER WAS CONTROLLED AND TRANSPORTED TO THE 011TH DISTRICT FOR FURTHER PROCESSING. ABOVE WAS CLEAR OF INVESTIGATIVE ALERTS/WARRANTS. ABOVE WAS CLEAR OF CS2 AND G.I.P.P. LISTINGS.

- STAR#: 8250 NAME: GRAYLIN WATSON BEAT: 1161C
- STAR#: 11129 NAME: ANDREW NEBERIEZA BEAT: 1161B
- STAR#: 7709 NAME: AISHA KNIGHT BEAT: 1161C
- STAR#: 19970 NAME: DARRYL EDWARDS BEAT: 1161B
- STAR#: 5425 NAME: OMAR GOMEZ FARRINGTO BEAT: 6734B
- STAR#: 13061 NAME: NICHOLAUS LESCH BEAT: 6734E
- STAR#: 10723 NAME: MATTHEW BOUCH BEAT: 6734D

## PERSONNEL

	Star No	Emp No	Name	User	Date	Unit	Beat
Reporting Officer	8250	[REDACTED]	WATSON, Graylin, L	[REDACTED]	25 Aug 2014 23:47	011	1161B

## IUCR ASSOCS.

Victim	IUCR	Crime	Offender
STATE OF ILLINOIS	0560	Assault - Simple	[REDACTED]
STATE OF ILLINOIS	0460	Battery - Simple	[REDACTED]

MEMBER INVOLVED	1. DATE OF INCIDENT <b>25-AUG-2014</b>		TIME <b>22:00:00</b>		2. ADDRESS OF OCCURRENCE <b>[REDACTED]</b>			3. LOCATION CODE <b>303</b>		4. BEAT/OCCUR <b>1123</b>								
	5. POSITION <b>9161</b>		6. LAST NAME <b>EDWARDS</b>		7. FIRST NAME <b>DARRYL</b>		8. STAR NO. <b>19970</b>		9. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		10. RACE CODE <b>BLK</b>		11. AGE <b>[REDACTED]</b>		12. HT. <b>509</b>		13. WT. <b>206</b>	
	14. DATE OF APPT. <b>29-JUL-2002</b>		15. EMPLOYEE NO. <b>[REDACTED]</b>		16. UNIT & BEAT OF ASSIGNMENT <b>011 1161B</b>		17. DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off		18. MEMBER INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		19. MEMBER IN UNIFORM? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No							
	20. LAST NAME <b>[REDACTED]</b>			21. FIRST NAME <b>[REDACTED]</b>			22. M.I. <b>[REDACTED]</b>		23. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		24. RACE <b>BLK</b>		25. D.O.B. <b>[REDACTED]</b>		26. HT. <b>511</b>		27. WT. <b>210</b>	
SUBJECT INFORMATION	28. TELEPHONE NO. <b>[REDACTED]</b>			30. WAS SUBJECT ARMED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No			31. SUBJECT INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No			32. SUBJECT ALLEGED INJURY? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No								
	33. WHERE WAS MEDICAL TREATMENT OBTAINED? <b>[REDACTED]</b>			34. BY WHOM? <b>[REDACTED]</b>			35. CONDITION <input type="checkbox"/> 01 Apparently Normal <input checked="" type="checkbox"/> 02 Under Influence <input type="checkbox"/> 03 Hospitalized <input checked="" type="checkbox"/> 04 Not Hospitalized <input type="checkbox"/> 05 Refused Medical Aid											
	36. CHARGES PLACED <b>[REDACTED]</b>			37. CB NO. <b>[REDACTED]</b>			IR NO. <b>[REDACTED]</b>											
REASON FOR USE OF FORCE (Check all that apply)	38. <input type="checkbox"/> DNA																	
	SUBJECT'S ACTIONS DID NOT FOLLOW VERBAL DIRECTION <input checked="" type="checkbox"/> STIFFENED (DEAD WEIGHT) <input checked="" type="checkbox"/> OTHER _____ MEMBERS RESPONSE MEMBER PRESENCE <input checked="" type="checkbox"/> VERBAL COMMANDS <input checked="" type="checkbox"/> ESCORT HOLDS <input type="checkbox"/> WRISTLOCK <input type="checkbox"/> ARMBAR <input type="checkbox"/> PRESSURE SENSITIVE AREAS <input type="checkbox"/> CONTROL INSTRUMENT <input type="checkbox"/> OC/CHEMICAL WEAPON W/AUTHORIZATION <input type="checkbox"/> OTHER _____ OPEN HAND STRIKE <input type="checkbox"/> TAKE DOWN / EMERGENCY HANDCUFFING <input type="checkbox"/> OC CHEMICAL WEAPON <input type="checkbox"/> CANINE <input type="checkbox"/> TASER (Probe Discharge) <input checked="" type="checkbox"/> TASER (Contact Stun) <input checked="" type="checkbox"/> TASER (Laser Targeted) <input checked="" type="checkbox"/> TASER (Spark Displayed) <input checked="" type="checkbox"/> OTHER _____ IMMINENT THREAT OF BATTERY <input type="checkbox"/> OTHER _____ ELBOW STRIKE <input type="checkbox"/> CLOSED HAND STRIKE/PUNCH <input type="checkbox"/> IMPACT WEAPON (Describe in Box 40) <input type="checkbox"/> OTHER _____ KNEE STRIKE <input type="checkbox"/> KICKS <input type="checkbox"/> IMPACT MUNITION (Describe in Box 40) <input type="checkbox"/> ATTACK WITH WEAPON <input type="checkbox"/> ATTACK WITHOUT WEAPON <input type="checkbox"/> OTHER _____ USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM <input type="checkbox"/> WEAPON <input type="checkbox"/> OTHER _____																	
WEAPON DISCHARGE INCIDENT	39. <input type="checkbox"/> DNA																	
	40. ADDITIONAL INFORMATION <b>[REDACTED]</b>																	
	41. WEAPON TYPE <input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN <input type="checkbox"/> 04 SEMI-AUTO PISTOL <input type="checkbox"/> 05 CHEMICAL WEAPON <input checked="" type="checkbox"/> 06 TASER (Probe Discharge) <input type="checkbox"/> 07 OTHER 42. INCIDENT OCCURRED <input type="checkbox"/> Indoors <input checked="" type="checkbox"/> Outdoors 43. LIGHTING CONDITIONS <input checked="" type="checkbox"/> 01 Night <input type="checkbox"/> 02 Daylight <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input type="checkbox"/> 05 Poor Artificial <input type="checkbox"/> 06 Good Artificial 44. WEATHER CONDITIONS <b>CLEAR</b> 45. MAKE/MANUFACTURER <b>[REDACTED]</b> 46. MODEL <b>[REDACTED]</b> 47. BARREL LENGTH <b>[REDACTED]</b> 48. CALIBER/GAUGE <b>[REDACTED]</b>																	
	49. TASER DART ID NO. <b>D62004FHN</b>		50. WEAPON SERIAL NO. (Include Letters) <b>ZZX3006A5</b>			51. CHICAGO GUN REG. NO. <b>[REDACTED]</b>			52. IL FIREARM OWNER ID. NO. <b>[REDACTED]</b>			53. HANDGUN CERTIFICATE NO. <b>[REDACTED]</b>						
CASE INFO.	54. SPECIAL WEAPON CERTIFICATE NO. <b>[REDACTED]</b>		55. PROPERTY INVENTORY NO. <b>[REDACTED]</b>			56. TYPE OF AMMUNITION USED <b>[REDACTED]</b>			57. NO. OF WEAPONS DISCHARGED BY THIS MEMBER <b>1</b>			58. TOTAL NO. OF SHOTS MEMBER FIRED <b>[REDACTED]</b>						
	59. WHO FIRED FIRST SHOT <input type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER <input type="checkbox"/> 03 OTHER (SPECIFY) <b>[REDACTED]</b>			60. WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO <b>[REDACTED]</b>			61. NO. OF CATRIDGES/ SHOT SHELLS RELOADED <b>[REDACTED]</b>			62. HOW WAS MEMBER'S HANDGUN WORN <input type="checkbox"/> 01 RT. SIDE (WAIST) <input type="checkbox"/> 02 LT. SIDE (WAIST) <input type="checkbox"/> 03 OTHER (Specify) <b>[REDACTED]</b>								
	63. HOW WAS MEMBER'S HANDGUN DRAWN <input type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW <input type="checkbox"/> 03 OTHER (Specify) <b>[REDACTED]</b>			64. SPECIFY METHOD/EQUIPMENT USED TO RELOAD <b>[REDACTED]</b>			65. DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO <b>[REDACTED]</b>											
	66. DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC) <b>[REDACTED]</b>						67. DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0 - 05 FT. <input type="checkbox"/> 02 05 - 10 FT. <input type="checkbox"/> 03 10 - 15 FT. <input type="checkbox"/> 04 OVER 15 FT. <b>[REDACTED]</b>											
	68. PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN <b>[REDACTED]</b>						69. POSITION OF MEMBER DISCHARGING WEAPON <input type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY) <b>[REDACTED]</b>											
	70. EVENT NO. <b>[REDACTED]</b>																	
SIGNATURES	71. R.D. NO. <b>[REDACTED]</b>																	
	72. NOTIFICATIONS (OC OR TASER INCIDENT): <input checked="" type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT. & W.C./DIST. OF OCCUR. NOTIFICATIONS (FIREARM INCIDENT): <input type="checkbox"/> OEMC <input type="checkbox"/> DESK SGT. & W.C./DIST. OF OCCUR. <input type="checkbox"/> OP COMMAND <input type="checkbox"/> DET. DIV. Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report.																	
SIGNATURES	73. REPORTING MEMBER (Print Name) <b>EDWARDS, DARRYL</b> <b>25-AUG-2014 23:47:36</b> STAR/EMPLOYEE NO. <b>19970</b> SIGNATURE <b>[REDACTED]</b>																	
	74. REVIEWING SUPERVISOR (Print Name) <b>RODRIGUEZ, DAVID M</b> STAR NO. <b>1015</b> SIGNATURE <b>[REDACTED]</b> DATE REVIEWED <b>25-AUG-2014 23:49:24</b> TIME <b>[REDACTED]</b>																	



## WATCH COMMANDER/OCIC REVIEW

THE WATCH COMMANDER WILL COMPLETE THE REVIEW SECTION FOR 1.) ALL INCIDENTS THAT DID NOT INVOLVE THE DISCHARGE OF A FIREARM; 2.) FIREARM DISCHARGE INCIDENTS INVOLVING THE DESTRUCTION OF AN ANIMAL OR; 3.) ACCIDENTAL DISCHARGE OF A FIREARM NOT RESULTING IN AN INJURY TO ANY PERSON.

THE ADS WILL COMPLETE THE REVIEW SECTION FOR ALL INCIDENTS INVOLVING: 1.) THE DISCHARGE OF A FIREARM OR IMPACT MUNITIONS BY OR AT A DEPARTMENT MEMBER EXCEPT FOR AN ANIMAL DESTRUCTION OR AN ACCIDENTAL DISCHARGE THAT DOES NOT RESULT IN AN INJURY TO ANY PERSON; 2.) MEMBER'S USE OF FORCE BY WHATEVER MEANS THAT RESULTS IN THE DEATH OF A PERSON; 3.) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 OR 2.

75. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

☐ DNA

☒ REFUSED

☐ UNABLE TO INTERVIEW (Specify Reason)

R/Lt attempted to interview the offender in the 011th district. The offender did not wish to speak about the incident.

76. WATCH COMMANDER/OCIC RATIONALE FOR BOX 77 FINDING

R/Lt concludes that the members actions were in compliance with department procedures and directives based on the information available at the time of the this report. The officers repeatedly asked the offender to disperse from an area and he repeatedly refused to comply. The officers went to take the offender into custody at which time he assumed a fighting stance against one of the officers placing that officer in fear or being battered by the offender. The taser was deployed in compliance with the dept use of force model.

77. WATCH COMMANDER/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION:

☒ I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES.

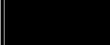
☐ I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED.

LOG NO./CRNO. 1071188 OBTAINED

78. WATCH COMMANDER/OCIC (Print Name)

COWIN, RAYMOND L

SIGNATURE



DATE COMPLETED

TIME

26-AUG-2014 00:09:21

79. DISTRIBUTION OF ORIGINAL TRR:

A TRR PACKET, INCLUDING THE TRR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE OFFICE OF PROFESSIONAL STANDARDS.

ATTACHMENTS - PHOTOCOPIES OF:

☐ SUPPLEMENTARY REPORT

☐ I.O.D. REPORT

80. TOTAL TRR's THIS EVENT No.

☐ CASE REPORT

☐ OFFICER BATTERY REPORT

☐ CR INITIATION REPORT

2

☐ ARREST REPORT

☐ TO-FROM-SUBJECT REPORTS FROM DEPARTMENT WITNESS(ES)

## TACTICAL RESPONSE REPORT/Chicago Police Department

MEMBER INVOLVED	1. DATE OF INCIDENT <b>25-AUG-2014</b>		TIME <b>22:00:00</b>		2. ADDRESS OF OCCURRENCE [REDACTED]			3. LOCATION CODE <b>303</b>		4. BEAT/OCCUR <b>1123</b>																		
	5. POSITION <b>9161</b>		6. LAST NAME <b>NEBERIEZA</b>		7. FIRST NAME <b>ANDREW M</b>		8. STAR NO. <b>11129</b>		9. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		10. RACE CODE <b>WHI</b>		11. AGE [REDACTED]		12. HT. <b>602</b>		13. WT. <b>235</b>											
	14. DATE OF APPT. <b>03-JAN-2005</b>			15. EMPLOYEE NO. [REDACTED]		16. UNIT & BEAT OF ASSIGNMENT <b>011 1161B</b>		17. DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off		18. MEMBER INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		19. MEMBER IN UNIFORM? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No																
SUBJECT INFORMATION	20. LAST NAME [REDACTED]				21. FIRST NAME [REDACTED]				22. M.I. [REDACTED]		23. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		24. RACE <b>BLK</b>		25. D.O.B. [REDACTED]		26. HT. <b>511</b>		27. WT. <b>210</b>									
	29. TELEPHONE NO. [REDACTED]				30. WAS SUBJECT ARMED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No				31. SUBJECT INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No				32. SUBJECT ALLEGED INJURY? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No															
	33. WHERE WAS MEDICAL TREATMENT OBTAINED?				34. BY WHOM?				35. CONDITION <input type="checkbox"/> 01 Apparently Normal <input checked="" type="checkbox"/> 02 Under Influence <input type="checkbox"/> 03 Hospitalized <input type="checkbox"/> 04 Not Hospitalized <input type="checkbox"/> 05 Refused Medical Aid																			
36. CHARGES PLACED <input type="checkbox"/> DNA																		37. CB NO. [REDACTED]		IR NO. <input type="checkbox"/> DNA								
REASON FOR USE OF FORCE (Check all that apply)	38. <input type="checkbox"/> DNA		SUBJECT'S ACTIONS		MEMBER'S RESPONSE		PASSIVE RESISTER		ACTIVE RESISTER		ASSAILANT: ASSAULT		ASSAILANT: BATTERY		ASSAILANT: DEADLY FORCE													
			DID NOT FOLLOW VERBAL DIRECTION <input checked="" type="checkbox"/>		VERBAL COMMANDS <input checked="" type="checkbox"/>		ESCORT HOLDS <input checked="" type="checkbox"/>		WRISTLOCK <input checked="" type="checkbox"/>		ARMBAR <input checked="" type="checkbox"/>		PRESSURE SENSITIVE AREAS <input type="checkbox"/>		CONTROL INSTRUMENT <input type="checkbox"/>		OC/CHEMICAL WEAPON W/AUTHORIZATION <input type="checkbox"/>		OTHER _____									
			STIFFENED (DEAD WEIGHT) <input checked="" type="checkbox"/>		OTHER _____		FLED <input type="checkbox"/>		PULLED AWAY <input checked="" type="checkbox"/>		OTHER _____		IMMINENT THREAT OF BATTERY <input type="checkbox"/>		OTHER _____		ATTACK WITH WEAPON <input type="checkbox"/>		ATTACK WITHOUT WEAPON <input type="checkbox"/>		OTHER _____							
WEAPON DISCHARGE INCIDENT	39. <input checked="" type="checkbox"/> DNA		* OC/CHEMICAL WEAPON AUTHORIZED BY (NAME)		40. ADDITIONAL INFORMATION		POSITION		STAR NO.		UNIT		41. WEAPON TYPE <input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN <input type="checkbox"/> 04 SEMI-AUTO PISTOL <input type="checkbox"/> 05 CHEMICAL WEAPON <input type="checkbox"/> 06 TASER (Probe Discharge) <input type="checkbox"/> 07 OTHER		42. INCIDENT OCCURRED <input type="checkbox"/> Indoors <input checked="" type="checkbox"/> Outdoors		43. LIGHTING CONDITIONS <input checked="" type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input type="checkbox"/> 05 Poor Artificial <input type="checkbox"/> 06 Good Artificial		44. WEATHER CONDITIONS <b>CLEAR</b>									
			45. MAKE/MANUFACTURER		46. MODEL		47. BARREL LENGTH		48. CALIBER/GAUGE		49. TASER DART ID NO.		50. WEAPON SERIAL NO. (Include Letters)		51. CHICAGO GUN REG. NO.		52. IL FIREARM OWNER ID. NO.		53. HANDGUN CERTIFICATE NO.									
			54. SPECIAL WEAPON CERTIFICATE NO.		55. PROPERTY INVENTORY NO.		56. TYPE OF AMMUNITION USED		57. NO. OF WEAPONS DISCHARGED BY THIS MEMBER		58. TOTAL NO. OF SHOTS MEMBER FIRED		59. WHO FIRED FIRST SHOT <input type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER <input type="checkbox"/> 03 OTHER (SPECIFY)		60. WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO		61. NO. OF CARTRIDGES/SHOT SHELLS RELOADED		62. HOW WAS MEMBER'S HANDGUN WORN <input type="checkbox"/> 01 RT. SIDE (WAIST) <input type="checkbox"/> 02 LT. SIDE (WAIST) <input type="checkbox"/> 03 OTHER (Specify)									
CASE INFO.	72.		63. HOW WAS MEMBER'S HANDGUN DRAWN <input type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW <input type="checkbox"/> 03 OTHER (Specify)		64. SPECIFY METHOD/EQUIPMENT USED TO RELOAD		65. DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO		66. DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC)		67. DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0 - 05 FT. <input type="checkbox"/> 02 05 - 10 FT. <input type="checkbox"/> 03 10 - 15 FT. <input type="checkbox"/> 04 OVER 15 FT.		68. PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN		69. POSITION OF MEMBER DISCHARGING WEAPON <input type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY)		70. EVENT NO.		71. R.D. NO.									
			NOTIFICATIONS (OC OR TASER INCIDENT): <input type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT. & W.C./DIST. OF OCCUR.		NOTIFICATIONS (FIREARM INCIDENT): <input type="checkbox"/> OEMC <input type="checkbox"/> DESK SGT. & W.C./DIST. OF OCCUR. <input type="checkbox"/> OP COMMAND <input type="checkbox"/> DET. DIV.		Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report.																					
			73. REPORTING MEMBER (Print Name) <b>NEBERIEZA, ANDREW M</b>		STAR/EMPLOYEE NO. <b>11129</b>		SIGNATURE [REDACTED]		74. REVIEWING SUPERVISOR (Print Name) <b>RODRIGUEZ, DAVID M</b>		STAR NO. <b>1015</b>		SIGNATURE [REDACTED]		DATE REVIEWED <b>25-AUG-2014 23:17:03</b>		TIME											
SIGNATURES	75. REVIEWING SUPERVISOR (Print Name) <b>RODRIGUEZ, DAVID M</b>																		STAR NO. <b>1015</b>		SIGNATURE [REDACTED]		DATE REVIEWED <b>25-AUG-2014 23:17:03</b>		TIME			
	76. REVIEWING SUPERVISOR (Print Name) <b>RODRIGUEZ, DAVID M</b>																		STAR NO. <b>1015</b>		SIGNATURE [REDACTED]		DATE REVIEWED <b>25-AUG-2014 23:17:03</b>		TIME			

## WATCH COMMANDER/OCIC REVIEW

THE WATCH COMMANDER WILL COMPLETE THE REVIEW SECTION FOR 1.) ALL INCIDENTS THAT DID NOT INVOLVE THE DISCHARGE OF A FIREARM; 2.) FIREARM DISCHARGE INCIDENTS INVOLVING THE DESTRUCTION OF AN ANIMAL OR; 3.) ACCIDENTAL DISCHARGE OF A FIREARM NOT RESULTING IN AN INJURY TO ANY PERSON.

THE ADS WILL COMPLETE THE REVIEW SECTION FOR ALL INCIDENTS INVOLVING: 1.) THE DISCHARGE OF A FIREARM OR IMPACT MUNITIONS BY OR AT A DEPARTMENT MEMBER EXCEPT FOR AN ANIMAL DESTRUCTION OR AN ACCIDENTAL DISCHARGE THAT DOES NOT RESULT IN AN INJURY TO ANY PERSON; 2.) MEMBER'S USE OF FORCE BY WHATEVER MEANS THAT RESULTS IN THE DEATH OF A PERSON; 3.) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 OR 2.

75. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

☐ DNA

☒ REFUSED

☐ UNABLE TO INTERVIEW (Specify Reason)

R/Lt attempted to interview the offender in the 011th district. The offender did not wish to speak with R/Lt about the incident.

76. WATCH COMMANDER/OCIC RATIONALE FOR BOX 77 FINDING

R/Lt concludes that the members actions were in compliance with department procedures and directives based on the information available at the time of the this report. The officers repeatedly asked the offender to disperse from an area and he repeatedly refused to comply. The officers went to take the offender into custody at which time he assumed a fighting stance against one of the officers placing that officer in fear or being battered by the offender. The taser was deployed in compliance with the dept use of force model.

77. WATCH COMMANDER/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION:

☒ I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES.

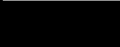
☐ I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED.

LOG NO./CRNO. 1071188 OBTAINED

78. WATCH COMMANDER/OCIC (Print Name)

**COWIN, RAYMOND L**

SIGNATURE



DATE COMPLETED

TIME

**26-AUG-2014 00:11:44**

79. DISTRIBUTION OF ORIGINAL TRR:

A TRR PACKET, INCLUDING THE TRR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE OFFICE OF PROFESSIONAL STANDARDS.

ATTACHMENTS - PHOTOCOPIES OF:

☐ SUPPLEMENTARY REPORT

☐ I.O.D. REPORT

80. TOTAL TRR's THIS EVENT No.

☐ CASE REPORT

☐ OFFICER BATTERY REPORT

☐ CR INITIATION REPORT

**1**

☐ ARREST REPORT

☐ TO-FROM-SUBJECT REPORTS FROM DEPARTMENT WITNESS(ES)

## TACTICAL RESPONSE REPORT/Chicago Police Department

MEMBER INVOLVED	1. DATE OF INCIDENT <b>25-AUG-2014</b>		TIME <b>22:00:00</b>		2. ADDRESS OF OCCURRENCE [REDACTED]			3. LOCATION CODE <b>303</b>		4. BEAT/OCCUR <b>1123</b>											
	5. POSITION <b>9161</b>		6. LAST NAME <b>WATSON</b>		7. FIRST NAME <b>GRAYLIN L</b>		8. STAR NO. <b>8250</b>		9. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		10. RACE CODE <b>BLK</b>		11. AGE [REDACTED]		12. HT. <b>609</b>		13. WT. <b>162</b>				
	14. DATE OF APPT. <b>02-DEC-2002</b>		15. EMPLOYEE NO. [REDACTED]		16. UNIT & BEAT OF ASSIGNMENT <b>011 1161C</b>		17. DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off		18. MEMBER INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		19. MEMBER IN UNIFORM? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No										
SUBJECT INFORMATION	20. LAST NAME [REDACTED]		21. FIRST NAME [REDACTED]		22. M.I. [REDACTED]		23. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		24. RACE <b>BLK</b>		25. D.O.B. [REDACTED]		26. HT. <b>511</b>		27. WT. <b>210</b>						
	28. TELEPHONE NO. [REDACTED]		29. TELEPHONE NO. [REDACTED]		30. WAS SUBJECT ARMED? <b>VERBAL THREAT (ASSAULT), HANDS/FISTS</b> <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		31. SUBJECT INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		32. SUBJECT ALLEGED INJURY? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No												
	33. WHERE WAS MEDICAL TREATMENT OBTAINED?				34. BY WHOM?		35. CONDITION <input type="checkbox"/> 01 Apparently Normal <input checked="" type="checkbox"/> 02 Under Influence <input type="checkbox"/> 03 Hospitalized <input type="checkbox"/> 04 Not Hospitalized <input type="checkbox"/> 05 Refused Medical Aid														
REASON FOR USE OF FORCE (Check all that apply)	36. CHARGES PLACED <input type="checkbox"/> DNA																	37. CB NO. [REDACTED]		IR NO. <input type="checkbox"/> DNA	
	38. <input type="checkbox"/> DNA		SUBJECT'S ACTIONS		PASSIVE RESISTER		ACTIVE RESISTER		ASSAILANT: ASSAULT		ASSAILANT: BATTERY		ASSAILANT: DEADLY FORCE								
			DID NOT FOLLOW VERBAL DIRECTION <input checked="" type="checkbox"/> STIFFENED (DEAD WEIGHT) <input checked="" type="checkbox"/> OTHER _____		FLED <input checked="" type="checkbox"/> PULLED AWAY <input checked="" type="checkbox"/> OTHER _____		IMMINENT THREAT OF BATTERY <input checked="" type="checkbox"/> OTHER _____		ATTACK WITH WEAPON <input type="checkbox"/> ATTACK WITHOUT WEAPON <input type="checkbox"/> OTHER <b>PUSHED P.O. WATSON #</b>		USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM <input type="checkbox"/> WEAPON <input type="checkbox"/> OTHER _____										
WEAPON DISCHARGE INCIDENT	MEMBER'S RESPONSE		MEMBER PRESENCE <input checked="" type="checkbox"/> VERBAL COMMANDS <input checked="" type="checkbox"/> ESCORT HOLDS <input checked="" type="checkbox"/> WRISTLOCK <input checked="" type="checkbox"/> ARMBAR <input checked="" type="checkbox"/> PRESSURE SENSITIVE AREAS <input checked="" type="checkbox"/> CONTROL INSTRUMENT <input type="checkbox"/> OC/CHEMICAL WEAPON W/AUTHORIZATION <input type="checkbox"/> OTHER _____		OPEN HAND STRIKE <input type="checkbox"/> TAKE DOWN / EMERGENCY HANDCUFFING <input checked="" type="checkbox"/> OC CHEMICAL WEAPON <input type="checkbox"/> CANINE <input type="checkbox"/> TASER (Probe Discharge) <input type="checkbox"/> TASER (Contact Stun) <input type="checkbox"/> TASER (Laser Targeted) <input type="checkbox"/> TASER (Spark Displayed) <input type="checkbox"/> OTHER _____		ELBOW STRIKE <input type="checkbox"/> CLOSED HAND STRIKE/PUNCH <input type="checkbox"/> IMPACT WEAPON (Describe in Box 40) <input type="checkbox"/> OTHER _____		KNEE STRIKE <input type="checkbox"/> KICKS <input type="checkbox"/> IMPACT MUNITION (Describe in Box 40) <input type="checkbox"/>		FIREARM <input type="checkbox"/> OTHER _____										
	39. <input checked="" type="checkbox"/> DNA																	40. ADDITIONAL INFORMATION			
	POSITION: _____ STAR NO.: _____ UNIT: _____																				
CASE INFO.	41. WEAPON TYPE <input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN		42. INCIDENT OCCURRED <input type="checkbox"/> Indoors <input checked="" type="checkbox"/> Outdoors		43. LIGHTING CONDITIONS <input checked="" type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input type="checkbox"/> 05 Poor Artificial <input type="checkbox"/> 06 Good Artificial		44. WEATHER CONDITIONS <b>CLEAR</b>		45. MAKE/MANUFACTURER		46. MODEL		47. BARREL LENGTH		48. CALIBER/GAUGE						
	49. TASER DART ID NO.		50. WEAPON SERIAL No. (Include Letters)		51. CHICAGO GUN REG. NO.		52. IL FIREARM OWNER ID. NO.		53. HANDGUN CERTIFICATE NO.												
	54. SPECIAL WEAPON CERTIFICATE NO.		55. PROPERTY INVENTORY NO.		56. TYPE OF AMMUNITION USED		57. NO. OF WEAPONS DISCHARGED BY THIS MEMBER		58. TOTAL NO. OF SHOTS MEMBER FIRED												
SIGNATURES	59. WHO FIRED FIRST SHOT <input type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER <input type="checkbox"/> 03 OTHER (SPECIFY)		60. WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO		61. NO. OF CARTRIDGES/SHOT SHELLS RELOADED		62. HOW WAS MEMBER'S HANDGUN WORN <input type="checkbox"/> 01 RT. SIDE (WAIST) <input type="checkbox"/> 02 LT. SIDE (WAIST) <input type="checkbox"/> 03 OTHER (Specify)		63. HOW WAS MEMBER'S HANDGUN DRAWN <input type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW <input type="checkbox"/> 03 OTHER (Specify)		64. SPECIFY METHOD/EQUIPMENT USED TO RELOAD		65. DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO								
	66. DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC)		67. DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0 - 05 FT. <input type="checkbox"/> 02 05 - 10 FT. <input type="checkbox"/> 03 10 - 15 FT. <input type="checkbox"/> 04 OVER 15 FT.		68. PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN		69. POSITION OF MEMBER DISCHARGING WEAPON <input type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY)														
	70. EVENT NO. [REDACTED]																				
SIGNATURES	71. R.D. NO. [REDACTED]																				
	72. NOTIFICATIONS (OC OR TASER INCIDENT): <input type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT. & W.C./DIST. OF OCCUR. NOTIFICATIONS (FIREARM INCIDENT): <input type="checkbox"/> OEMC <input type="checkbox"/> DESK SGT. & W.C./DIST. OF OCCUR. <input type="checkbox"/> OP COMMAND <input type="checkbox"/> DET. DIV. Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report.																				
	73. REPORTING MEMBER (Print Name) <b>WATSON, GRAYLIN L</b> <b>26-AUG-2014 00:07:40</b> STAR/EMPLOYEE NO. <b>8250</b> SIGNATURE [REDACTED] Reviewing supervisor will ensure the legibility and completeness of this report and attest by entering the required information below.																				
74. REVIEWING SUPERVISOR (Print Name) <b>RODRIGUEZ, DAVID M</b> STAR NO. <b>1015</b> SIGNATURE [REDACTED] DATE REVIEWED <b>26-AUG-2014 00:09:37</b> TIME																					

## WATCH COMMANDER/OCIC REVIEW

THE WATCH COMMANDER WILL COMPLETE THE REVIEW SECTION FOR 1.) ALL INCIDENTS THAT DID NOT INVOLVE THE DISCHARGE OF A FIREARM; 2.) FIREARM DISCHARGE INCIDENTS INVOLVING THE DESTRUCTION OF AN ANIMAL OR; 3.) ACCIDENTAL DISCHARGE OF A FIREARM NOT RESULTING IN AN INJURY TO ANY PERSON.

THE ADS WILL COMPLETE THE REVIEW SECTION FOR ALL INCIDENTS INVOLVING; 1.) THE DISCHARGE OF A FIREARM OR IMPACT MUNITIONS BY OR AT A DEPARTMENT MEMBER EXCEPT FOR AN ANIMAL DESTRUCTION OR AN ACCIDENTAL DISCHARGE THAT DOES NOT RESULT IN AN INJURY TO ANY PERSON; 2.) MEMBER'S USE OF FORCE BY WHATEVER MEANS THAT RESULTS IN THE DEATH OF A PERSON; 3.) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 OR 2.

75. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

☐ DNA

☒ REFUSED

☐ UNABLE TO INTERVIEW (Specify Reason)

R/Lt attempted to interview the offender in the 011th district. The offender did not wish to speak about the incident.

76. WATCH COMMANDER/OCIC RATIONALE FOR BOX 77 FINDING

R/Lt concludes that the members actions were in compliance with department procedures and directives based on the information available at the time of the this report. The officers repeatedly asked the offender to disperse from an area and he repeatedly refused to comply. The officers went to take the offender into custody at which time he assumed a fighting stance against officer Watson placing that officer in fear or being battered by the offender. The offender then pushed officer Watson. The taser was deployed in compliance with the dept use of force model.

77. WATCH COMMANDER/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION:

☒ I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES.

☐ I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED.

LOG NO./CRNO. 1071188 OBTAINED

78. WATCH COMMANDER/OCIC (Print Name)

**COWIN, RAYMOND L**

SIGNATURE

[REDACTED]

DATE COMPLETED

TIME

**26-AUG-2014 00:15:47**

79. DISTRIBUTION OF ORIGINAL TRR:

A TRR PACKET, INCLUDING THE TRR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE OFFICE OF PROFESSIONAL STANDARDS.

ATTACHMENTS - PHOTOCOPIES OF:

☐ SUPPLEMENTARY REPORT

☐ I.O.D. REPORT

80. TOTAL TRR's THIS EVENT No.

☐ CASE REPORT

☒ OFFICER BATTERY REPORT

☐ CR INITIATION REPORT

**2**

☐ ARREST REPORT

☐ TO-FROM-SUBJECT REPORTS FROM DEPARTMENT WITNESS(ES)

OFFICER'S BATTERY REPORT  
CHICAGO POLICE DEPARTMENT

RD NO. [REDACTED]

INSTRUCTIONS: This form is to be completed for all incidents when: (1) a sworn member is the victim of a murder, aggravated battery, battery, aggravated assault, or assault while performing a police function either on-duty or off-duty, (2) a detention aide is the victim of a murder, aggravated battery, battery, aggravated assault, or assault while in the performance of his or her duties.

"X APPLICABLE BOXES"

OFFICER INFORMATION		INCIDENT INFORMATION	
NAME (LAST - FIRST - M.I.) WATSON, GRAYLIN L		<input type="checkbox"/> 1. INDOOR <input checked="" type="checkbox"/> 2. OUTDOOR	
STAR NO. 8250		ADDRESS OF OCCURRENCE [REDACTED]	
POSITION POLICE OFFICER		CITY <input checked="" type="checkbox"/> CHICAGO STATE (If outside Chicago)	
DATE OF APPOINTMENT 02-DEC-2002		LOCATION CODE 303-SIDEWALK	
EMPLOYEE NO. [REDACTED]		BEAT OF OCCURRENCE 1123	
UNIT OF ASSIGNMENT 011		BEAT/CALL NO. 1161C	
SEX <input checked="" type="checkbox"/> 1. M <input type="checkbox"/> 2. F RACE BLACK		DATE OF OCCURRENCE 25-AUG-2014	
DOB [REDACTED]		TIME 22:00:00	
HEIGHT 609		DAY OF WEEK MONDAY	
WEIGHT 162		NO. OF OFFICERS BATTERED 2	
TYPE OF ASSIGNMENT WHEN BATTERY OCCURRED		WERE THERE ASSISTING UNITS ON SCENE? 1. <input checked="" type="checkbox"/> YES 2. <input type="checkbox"/> NO	
<input checked="" type="checkbox"/> 1. ON DUTY <input type="checkbox"/> A. UNIFORM, PATROL DUTY <input type="checkbox"/> B. UNIFORM, OTHER DUTY Describe _____ <input checked="" type="checkbox"/> C. CITIZEN'S DRESS <input type="checkbox"/> D. TACTICAL <input type="checkbox"/> E. B.I.S. UNIT <input type="checkbox"/> F. SPECIAL EMPLOYMENT <input type="checkbox"/> G. OTHER _____ <input type="checkbox"/> 2. OFF DUTY <input type="checkbox"/> 3. SPECIAL EMPLOYMENT <input type="checkbox"/> 4. SECONDARY / OTHER		IF YES HOW MANY ASSISTING OFFICERS WERE PRESENT AT TIME BATTERY (EXCLUDING YOU OR YOUR PARTNERS) ? 3	
WORKING: <input type="checkbox"/> A. ALONE <input type="checkbox"/> B. WITH ONE PARTNER <input checked="" type="checkbox"/> C. WITH MULTIPLE PARTNERS How many? 3 PATROL TYPE: <input checked="" type="checkbox"/> A. SQUAD CAR <input type="checkbox"/> B. FOOT <input type="checkbox"/> C. BICYCLE <input type="checkbox"/> D. APV/MOTORCYCLE <input type="checkbox"/> E. SQUADROL <input type="checkbox"/> F. OTHER _____		MANNER OF ATTACK <input type="checkbox"/> 01. SHOT <input type="checkbox"/> 02. SHOT AT <input type="checkbox"/> 03. STABBED/CUT (INCLUDING ACTUAL ATTEMPT) <input type="checkbox"/> 04. STRUCK/BLUNT FORCE (INCLUDING ACTUAL ATTEMPT) <input checked="" type="checkbox"/> 05. OTHER (INCLUDING VERBAL THREATS)	
TYPE OF ACTIVITY		TYPE OF WEAPON/THREAT	
<input type="checkbox"/> A. AMBUSH - NO WARNING <input type="checkbox"/> B. TRAFFIC STOP/PURSUIT <input type="checkbox"/> C. INVESTIGATING SUSPICIOUS PERSON <input type="checkbox"/> D. DISTURBANCE - DOMESTIC <input type="checkbox"/> E. DISTURBANCE - MENTAL PATIENT <input type="checkbox"/> F. DISTURBANCE - RIOT/MOB ACTION/CIVIL DISORDER <input checked="" type="checkbox"/> G. DISTURBANCE - OTHER <input type="checkbox"/> H. MAN WITH A GUN <input type="checkbox"/> I. PURSUING/ARRESTING OFFENDER (Specify) CHARGE _____ IUCR CODE _____ <input type="checkbox"/> J. PROCESSING/TRANSPORTING/GUARDING A PRISONER (Specify) ORIGINAL CHARGE _____ ORIGINAL IUCR CODE _____ <input type="checkbox"/> K. OTHER		(Check all that apply): <input type="checkbox"/> A. FIREARM CALIBER _____ <input type="checkbox"/> 1. REVOLVER <input type="checkbox"/> 2. SEMI-AUTOMATIC <input type="checkbox"/> 3. RIFLE <input type="checkbox"/> 4. SHOTGUN <input checked="" type="checkbox"/> D. HANDS/FISTS <input type="checkbox"/> E. FEET <input type="checkbox"/> F. MOUTH (SPIT, BITE, ETC.) <input checked="" type="checkbox"/> G. VERBAL THREAT (ASSAULT) <input type="checkbox"/> H. OTHER (SPECIFY) _____ <input type="checkbox"/> B. VEHICLE <input type="checkbox"/> 1. OFFICER STRUCK WITH VEHICLE <input type="checkbox"/> 2. ATTEMPTED TO STRIKE OFFICER WITH VEHICLE <input type="checkbox"/> C. KNIFE/OTHER CUTTING INSTRUMENT <input type="checkbox"/> I. BLUNT INSTRUMENT	
TYPE OF INJURY TO OFFICER		FIREARM USE INFORMATION (Check all that apply): <input type="checkbox"/> A. OFFICER AT GUNPOINT <input type="checkbox"/> B. OFFICER'S OWN WEAPON OBTAINED <input type="checkbox"/> C. ATTEMPTED TO OBTAIN OFFICER'S OWN WEAPON	
<input type="checkbox"/> A. FATAL <input type="checkbox"/> B. NON-FATAL - MAJOR INJURY (Broken Bones/Serious Lacerations/Internal Injuries) <input type="checkbox"/> C. NON-FATAL - MINOR INJURY (Bruises/Swelling/Minor Abrasions) <input checked="" type="checkbox"/> D. NONE APPARENT/NONE		OFFENDER INFORMATION	
LIGHTING CONDITIONS AT INCIDENT		SEX <input checked="" type="checkbox"/> 1. M <input type="checkbox"/> 2. F RACE BLACK	
<input type="checkbox"/> A. DAYLIGHT <input type="checkbox"/> D. DUSK <input checked="" type="checkbox"/> B. NIGHT <input type="checkbox"/> E. ARTIFICIAL LIGHT <input type="checkbox"/> C. DAWN <input type="checkbox"/> 1. POOR <input type="checkbox"/> 2. GOOD		DOB [REDACTED]	
		CB NO. [REDACTED] IR NO.	
		WAS THE OFFENDER'S ACTIVITY: DRUG RELATED? <input type="checkbox"/> 1. YES <input type="checkbox"/> 2. NO <input checked="" type="checkbox"/> 3. UNKNOWN	
		GANG RELATED? <input type="checkbox"/> 1. YES <input type="checkbox"/> 2. NO <input checked="" type="checkbox"/> 3. UNKNOWN	
		NO. OF OFFENDERS PRESENT? 1	
		WEATHER CONDITIONS	
<input checked="" type="checkbox"/> A. CLEAR <input type="checkbox"/> D. FOG / SMOKE / HAZE <input type="checkbox"/> G. OTHER <input type="checkbox"/> B. RAIN <input type="checkbox"/> E. SLEET / HAIL <input type="checkbox"/> C. SNOW <input type="checkbox"/> F. SEVERE CROSS WIND		APPROXIMATE OUTDOOR TEMPERATURE: 80 °F	



-

REPORTING MEMBER - SIGNATURE WATSON, GRAYLIN L	STAR NO. 8250	WATCH COMMANDER /UNIT COMMANDING OFFICER- SIGNATURE COWIN, RAYMOND L	STAR NO. 262
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## ARREST REPORT

3510 S. Michigan Avenue, Chicago, Illinois 60653

(For use by Chicago Police Department Personnel Only)

CPD-11. 420C (REV. 6/30)

## ARREST REPORTING

OFFENDER

Name: [REDACTED]

Res: [REDACTED]

Beat: 1522

Male

Black

5' 11"

210 lbs

Black Eyes

Black Hair

Dreadlocks Hair

Style

Dark Complexion

DOB: [REDACTED]

AGE: 33 years

POB: Illinois

ARMED WITH Unarmed

Marks: [REDACTED]

INCIDENT

Arrest Date: 25 August 2014 22:02

TRR Completed? Yes

Total No Arrested: 1

Co-Arrests

Assoc Cases

Location: [REDACTED]

Beat: 1123

DCFS Ward ? No

303 - Sidewalk

Dependent Children? No

Holding Facility: District 011 Male Lockup

Resisted Arrest? Yes

CHARGES

1 Offense As Cited **720 ILCS 5.0/31-1-A**  
RESISTING/PC OFF/CORR EMP/FRFTR  
Class A - Type M

2 Offense As Cited **720 ILCS 5.0/31-1-A**  
RESISTING/PC OFF/CORR EMP/FRFTR  
Class A - Type M

3 Offense As Cited **720 ILCS 5.0/12-3-A-2**  
BATTERY - MAKE PHYSICAL CONTACT  
Class A - Type M

4 Offense As Cited **720 ILCS 5.0/12-1-A**  
ASSAULT - SIMPLE  
Class C - Type M

## Victim

State Of Illinois, P.O. Watson # 8250

State Of Illinois, P.O. Neberiez # 11129

State Of Illinois, P.O. Watson # 8250

State Of Illinois, P.O. Watson # 8250

## ARREST REPORTING

RECOVERED  
NARCOTICS

NO NARCOTICS RECOVERED

WARRANT

NO WARRANT IDENTIFIED

NON-OFFENDER(S)

## VICTIM AND COMPLAINANT

Name: STATE OF ILLINOIS, P.O. Watson # 8250

Empl: 3151 W Harrison St  
Chicago, IL 60612  
312-746-8386

Beat: 1134

DOB:

Age:

Comments:

Injured? No

Deceased? No

Hospitalized? No

Treated and Released? No

## VICTIM AND COMPLAINANT

Name: STATE OF ILLINOIS, P.O. Neberleza # 11129

Empl: 3151 W Harrison St  
Chicago, IL 60612  
312-746-8386

Beat: 1134

DOB:

Age:

Comments:

Injured? No

Deceased? No

Hospitalized? No

Treated and Released? No

ARRESTEE  
VEHICLE

NO ARRESTEE VEHICLE INFORMATION ENTERED

PROPERTIES

## Confiscated Properties :

All confiscated properties are recorded in the e-Track System. This system can be queried by the inventory number to retrieve all official court documents related to evidence and/or recovered properties.

PROPERTIES INFORMATION FOR [REDACTED]

NOT AVAILABLE IN THE AUTOMATED ARREST SYSTEM.

## ARREST REPORTING

(The facts for probable cause to arrest AND to substantiate the charges include, but are not limited to, the following)

ADDRESS OF ARREST: [REDACTED]

EV# [REDACTED] IN SUMMARY R/Os WHILE ON ROUTINE PATROL OBSERVED SEVERAL MALES/FEMALES DRINKING/LOITERING AT ABOVE ADDRESS WHICH IS A KNOWN NARCOTICS AREA. R/O GAVE ABOVE CITIZENS AN ORDER TO DISPERSE. ABOVE OFFENDER REFUSED TO LEAVE THE SCENE AFTER HE WAS GIVEN 2 ORDERS TO DISPERSE. R/Os EXITED THE VEHICLE AND APPROACHED ABOVE OFFENDER. AT THIS TIME ABOVE OFFENDER WAS TOLD TWICE MORE TO DISPERSE. ABOVE GOT OFF OF HIS BIKE AFTER THE LAST ORDER TO DISPERSE, GOT INTO A FIGHTING STANCE AND YELLED "BUST A MOVE!" R/Os BEING IN FEAR OF RECEIVING A BATTERY ATTEMPTED TO PLACE ABOVE OFFENDER IN CUSTODY. WHILE TRYING TO PLACE ABOVE OFFENDER IN HANDCUFFS HE BEGAN TO ACTIVELY RESIST BY PUSHING P.O. WATSON #8250, CONTINUING TO WALK AWAY FROM R/Os, AND THEN STIFFENING HIS ARMS TRYING TO DEFEAT THE ARREST. P.O. EDWARDS #19970 DEPLOYED TASER AFTER YELLING "TASER!, TASER!" STRIKING ABOVE OFFENDER. ABOVE OFFENDER WAS ALSO DRY STUNNED BY P.O. EDWARDS. THE TASER AND DRY STUNNING HAD NO APPARENT EFFECT. EVENTUALLY OTHER POLICE OFFICERS ARRIVED ON SCENE TO HELP PLACE ABOVE OFFENDER IN CUSTODY. ABOVE WAS TAKEN DOWN TO THE GROUND AND CONTINUED TO KICK HIS LEGS AND STIFFEN HIS ARMS. THE ABOVE OFFENDER WAS CONTROLLED AND TRANSPORTED TO THE 011TH DISTRICT FOR FURTHER PROCESSING. ABOVE WAS CLEAR OF INVESTIGATIVE ALERTS/WARRANTS. ABOVE WAS CLEAR OF CS2 AND G.I.P.P. LISTINGS.

Desired Court Date: 26 September 2014

Branch: 43-2 3150 W FLOURNOY - Room

Court Sgt Handle? No

Initial Court Date: 26 August 2014

Branch: 43-2 3150 W FLOURNOY - Room

Docket #:

BOND INFORMATION NOT AVAILABLE

## ATTESTING OFFICER:

I hereby declare and affirm, under penalty of perjury, that the facts stated herein are accurate to the best of my knowledge, information and/or belief.

Attesting Officer: #8250 WATSON, G L [REDACTED] 25 AUG 2014 23:46

## ARRESTING OFFICER(S):

1st Arresting Officer: #8250 WATSON, G L [REDACTED] Beat 1161C

2nd Arresting Officer: #7709 KNIGHT, A M [REDACTED] Beat 1161C

## APPROVING SUPERVISOR:

Approval of Probable Cause : #1842 GALLAGHER, M J [REDACTED] 25 AUG 2014 23:47

## ARREST PROCESSING REPORT

Holding Facility: District 011 Male Lockup  
Received in Lockup: 26 August 2014 08:09  
Prints Taken: 26 August 2014 08:08  
Palprints Taken: Yes  
Photograph Taken: 26 August 2014 08:24  
Released from Lockup: 26 August 2014 10:08

Time Last Fed:

Time Called:

Phone#:

Cell #: G3

Transport Details : 2PO 1171 25-AUG-2014 22:12

## VISUAL CHECK OF ARRESTEE

## ARRESTEE QUESTIONNAIRE

Is there obvious pain or injury? No  
Is there obvious signs of infection? No  
Under the influence of alcohol/drugs? No  
Signs of alcohol/drug withdrawal? No  
Appears to be despondent? No  
Appears to be irrational? No  
Carrying medication? No

Presently taking medication? No  
(if female)are you pregnant?  
First time ever been arrested? No  
Attempted suicide/serious harm? No  
Serious medical or mental problems? No  
Are you receiving treatment? No  
Transgender/intersex/gender non-conforming? No

## RETURN TO HOLDING FACILITY COMMENTS:

## QUESTIONNAIRE REMARKS:

## LOCKUP KEEPER COMMENTS:

26 AUG 2014 04:58 15583 JOHNSON, Darryl L [REDACTED]

26 AUG 2014 09:02 MC GUIRE, Andrew C [REDACTED]

## EMERGENCY CONTACT

Name : REFUSED

Res:

Beat:

LOCKUP KEEPER PROCESSING

INTERVIEW LOG

NO INTERVIEWS LOGGED

VISITOR LOG

NO VISITORS LOGGED

## ARREST PROCESSING REPORT

MOVEMENT LOG

MOVEMENT LOG INFORMATION NOT AVAILABLE

WC COMMENTS

Watch Commander Comments:

REL w/o CHARGING

DOES NOT APPLY TO THIS ARREST

PROCESSING PERSONNEL

## ARRESTEE PROCESSING PERSONNEL:

			Beat
Searched By:	#15583	JOHNSON, D L	
Lockup Keeper:	#7276	BANKS, D K	
Assisting Arresting Officer:	#10723	BOUCH, M A	6734D
Assisting Arresting Officer:	#11129	NEBERIEZA, A M	1161B
Assisting Arresting Officer:	#13061	LESCH, N G	6734E
Assisting Arresting Officer:	#19970	EDWARDS, D	1161B
Assisting Arresting Officer:	#5425	GOMEZ FARRINGTO, O J	6734B
Fingerprinted By:		MCGUIRE, A C	

## APPROVAL PERSONNEL:

			Beat
Final Approval of Charges :	#1434	LASCH, A P	26 AUG 2014 09:16



# EVIDENCE SYNC<sup>TM</sup> OFFLINE

## DEVICE REPORT

### ECD Information

Model #: TASER\_ECD\_X2

Serial #: ZZX3006A5

Firmware Version: FWBundle Rev. 03.033

Device Health: Good

### Offline Report

Date:

25 Aug 2014 23:53:28

Local Timezone:

Central Standard Time (UTC -5:00)

### Event Log

GMT Time	Local Time	Event	Cartridge Info	Duration	Temp	Batt%
08/26/2014 00:15:25	08/25/2014 19:15:25	Armed	C1: 25' Standard C2: 25' Standard		28°C 28°C	90% 90%
08/26/2014 00:15:25	08/25/2014 19:15:25	Safe	C1: 25' Standard C2: 25' Standard	0s 0s	28°C 28°C	90% 90%
08/26/2014 02:59:30	08/25/2014 21:59:30	Armed	C1: 25' Standard C2: 25' Standard		34°C 34°C	90% 90%
08/26/2014 02:59:31	08/25/2014 21:59:31	Trigger	C1: Deployed	5s		90% 90%
08/26/2014 02:59:40	08/25/2014 21:59:40	Trigger	C2: Deployed	5s		90% 90%
08/26/2014 02:59:45	08/25/2014 21:59:45	Trigger	C2: Deployed	6s		90% 90%
08/26/2014 02:59:58	08/25/2014 21:59:58	Safe	C1: Deployed C2: Deployed	28s 28s	37°C 37°C	89% 89%
08/26/2014 03:00:06	08/25/2014 22:00:06	Armed	C1: Deployed C2: Deployed		37°C 37°C	89% 89%
08/26/2014 03:00:07	08/25/2014 22:00:07	Trigger	C1: Deployed	11s		89% 89%
08/26/2014 03:00:21	08/25/2014 22:00:21	Trigger	C2: Deployed	5s		88% 88%
08/26/2014 03:00:29	08/25/2014 22:00:29	Trigger	C2: Deployed	9s		88% 88%
08/26/2014 03:00:49	08/25/2014 22:00:49	Trigger	C2: Deployed	9s		87% 87%
08/26/2014 03:01:11	08/25/2014 22:01:11	Safe	C1: Deployed C2: Deployed	1m 5s 1m 5s	40°C 40°C	87% 87%
08/26/2014 04:51:19	08/25/2014 23:51:19	USB Connected	C1: Invalid Cart. Type C2: Invalid Cart. Type		29°C 29°C	0% 0%
08/26/2014 04:51:39	08/25/2014 23:51:39	Time Sync	08/25/2014 23:51:39 to 08/25/2014 23:52:52			

INDEPENDENT POLICE REVIEW AUTHORITY

17 December 2014  
Log # 1071188


TO: Chief Administrator  
Independent Police Review Authority

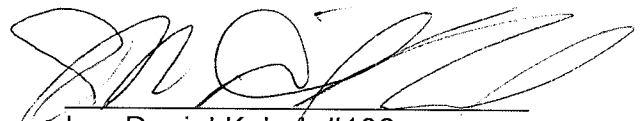
FROM: Investigator Daniel Kobel, #136

SUBJECT: Attempt to Contact Subject (Enhanced Taser Program)

On 17 December 2014, the R/I reviewed documents related to the arrest of [REDACTED] to gather more information regarding a taser deployment incident in which he was involved. The R/I met with the following results:

- ☒ Unable to contact due to no address or telephone contact number provided on departmental reports.
- ☐ Spoke with \_\_\_(Subject/Detainee)\_\_\_\_\_ who made no allegations of excessive force.
- ☐ Spoke with (Witness or Caretaker)\_\_\_\_\_ who made no allegations of excessive force relative to this incident
- ☐ Westlaw search of (Subject/Detainee) failed to produce a valid address or contact number.
- ☐ Other

Approved  
  
IPRA Supervisor

  
Inv. Daniel Kobel, #136

Log # 1071188  
Attachment #